

DIVISION IV AODA DAY TREATMENT	SECTION II COVERED SERVICES & RELATED LIMITATIONS	ISSUED 07/89	PAGE 4H2-001
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#### A. INTRODUCTION

The Wisconsin Medical Assistance Program (WMAP) coverage of alcohol and other drug abuse (AODA) day treatment was instituted by the Wisconsin Legislature in 1987 Act 339, in order to enhance the outpatient AODA services available to categorically needy WMAP recipients.

AODA day treatment is an appropriate and effective mode of treatment for a variety of recipients. Characteristically, AODA day treatment patients are persons likely to suffer imminent relapse into alcohol or other drug abuse unless they receive outpatient treatment with the structure and intensity provided by AODA day treatment. They are persons whose lives are adversely affected by their chemical abuse, with disruption of social, behavioral, or vocational functioning caused by chemical use. The recipient may have psychological or physical conditions which make AODA day treatment structure and intensity necessary for effective care; yet, these problems must not be of a severity which indicates that inpatient care is required (refer to Appendices 1 and 2 of this handbook for criteria). Usually, prior to requiring AODA day treatment services, lower levels of care have been attempted (such as outpatient counseling one or two hours per week) and have proven ineffective in maintaining sobriety for the individual.

For admission to an AODA day treatment program, a recipient must be detoxified from drugs or alcohol, have the ability to function in a semicontrolled medically supervised environment, have a demonstrated need for structure and intensity of treatment which is not available in outpatient treatment, and be willing to participate in aftercare upon completion of treatment.

#### B. COVERED SERVICES

AODA day treatment consists of medically prescribed treatments provided by AODA and related medical professionals (such as mental health counselors, physicians, psychiatrists, nurses, and occupational therapists) in a medically supervised outpatient setting. AODA day treatment services must be provided in a certified AODA day treatment program as discussed in Section I-B of this handbook. This program must be structured to provide a minimum of 60 hours of intensive direct treatment for a minimum of 10 hours a week, for a period not more than six weeks. Under extenuating circumstances such as sickness, vacation, or inclement weather, the treatment period may last up to eight weeks. AODA day treatment is provided under an individual plan of care developed by an interdisciplinary team in conjunction with the recipient, a physician, and, as appropriate, with the recipient's family. Included in treatment may be evaluation, treatment planning, group and individual counseling, recipient education when necessary for effective treatment, and rehabilitative services. (Refer to Appendices 1 and 2 of this handbook.)

The following procedures are covered under AODA day treatment:

1. Assessment (Procedure Code W8980). The first three hours of assessment and evaluation per recipient per provider in a calendar year regarding the need for and ability to benefit from AODA day treatment.
2. Assessment - Limitation Exceeded (Procedure code W8981). Additional hours spent in assessment and evaluation after the initial three hours of assessment have been provided in a calendar year.
3. AODA Day Treatment (Procedure code W8982). Intensive short-term AODA treatment provided on an outpatient basis by a hospital or outpatient facility certified under HSS 105.25.

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**C. NONCOVERED SERVICES**

The following services are not covered benefits of the WMAP:

1. AODA day treatment assessment and services provided to medically needy recipients, except under a HealthCheck referral for recipients under 21 years old.
2. AODA day treatment services performed without prior authorization when required (see Section III of this handbook for prior authorization discussion.).
3. AODA day treatment services billed under any other treatment modality, including AODA outpatient services, psychotherapy, occupational therapy, or case management.
4. AODA day treatment services which are primarily recreational, social or only educational in nature, including time devoted to meals, rest periods, transportation, or entertainment.
5. AODA day treatment services provided in a setting other than outpatient hospital or outpatient clinic, including the recipient's home.
6. Time spent in AODA day treatment by affected family members of the recipient.
7. AODA day treatment given in excess of five hours a day.
8. AODA day treatment is not a reimbursable benefit for hospital inpatients or nursing home residents. For inpatients or nursing home residents who need such treatment, AODA day treatment services are reimbursed through the per-discharge or per-diem rate paid to hospitals and nursing homes.